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Bib Data Sheet

SERIAL NUMBER 09/406,530	FILING DATE 09/27/1999 RULE -	CLASS 248	GROUP ART UNIT 3632	ATTORNEY DOCKET NO. 3757.3004
APPLICANTS ODD N. ODDSEN JR., EASTON, PA ; ** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/137,088 06/02/1999 ** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 10/15/1999				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY PA	SHEETS DRAWING 9	TOTAL CLAIMS 48
			INDEPENDENT CLAIMS 3	
ADDRESS 000530				
TITLE FILTER FOR POSITIONING ELECTRONIC DEVICES				
FILING FEE RECEIVED 697	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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ADDRESS JOHN P BLASKO J P BLASKO PROF CORP 111 NORTH BROAD STREET DOYLESTOWN, PA 18901										
TITLE TILTER FOR POSITIONING ELECTRONIC DEVICE										
FILING FEE RECEIVED 697	FEES: Authority has been given in Paper. No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td> </tr> <tr> <td><input type="checkbox"/> 1.18 Fees (Issue)</td> </tr> <tr> <td><input type="checkbox"/> Other _____</td> </tr> <tr> <td><input type="checkbox"/> Credit</td> </tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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